APPLICATION DATA SHEET

Electronic Version v14 Stylesheet Version v14.0

Title of Invention

GATE LENGTH PROXIMITY CORRECTED DEVICE

Application Type:

regular, utility

Attorney Docket Number: FIS920030087

Correspondence address:

Customer Number:

30449

Inventors Information:

Inventor 1:

Applicant Authority Type:

Inventor

Citizenship:

PK

Given Name:

Shahid

Family Name:

Butt

City of Residence:

Ossining

State of Residence:

NY

Country of Residence:

US

Address-1 of Mailing Address:

22 Yates Avenue

Address-2 of Mailing Address:

City of Mailing Address:

Ossining

State of Mailing Address:

NY

Postal Code of Mailing Address:

Country of Mailing Address:

US

Phone:

Fax:

E-mail:

Inventor 2:

Applicant Authority Type:

Inventor

Citizenship:

US

Given Name: Wayne Middle Name: F. Family Name: Ellis City of Residence: Jericho State of Residence: VT Country of Residence: US Address-1 of Mailing Address: 24 Sunset Ridge Address-2 of Mailing Address: City of Mailing Address: Jericho State of Mailing Address: VT Postal Code of Mailing Address: Country of Mailing Address: US Phone: Fax: E-mail: Inventor 3: **Applicant Authority Type:** Inventor Citizenship: US Given Name: John Middle Name: A. Family Name: Gabric **Essex Junction** City of Residence: VT State of Residence: Country of Residence: US 18 Indian Brook Road Address-1 of Mailing Address: Address-2 of Mailing Address: City of Mailing Address: **Essex Junction** VT State of Mailing Address: Postal Code of Mailing Address: US **Country of Mailing Address:** Phone: Fax:

E-mail:

Attorney Information: practitioner(s) at Customer Number: 30449 as our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Assignee 1: **Organization Name: International Business Machines Corporation** Address-1 of Mailing Address: **New Orchard Road** Address-2 of Mailing Address: City of Mailing Address: Armonk State of Mailing Address: NY Postal Code of Mailing Address: 10504 **Country of Mailing Address:** US Phone: Fax: E-mail: Assignee 2: **Organization Name:** Infineon North America Corp Address-1 of Mailing Address: 1730 North 1st Street Address-2 of Mailing Address: City of Mailing Address: San Jose CA State of Mailing Address: Postal Code of Mailing Address: 95112 Country of Mailing Address: US Phone:

Fax:

E-mail: